

2021 Local Sales Tax Return

These taxes are mandated by Bloomington City Code, Chapter 4

Checks payable to the "City of Bloomington." Mail **two** copies to the Accounting Division at the address below. Payments can also be made by ACH credit. Please e-mail <u>llatax@BloomingtonMN.gov</u> or call 952-563-4763 for instructions.

	lishment Name Corporate Name)												
Mailin	ng Address: Street						Minnesota Sales Tax Account Number (7 Digits)						
City		State		Zip									
Minnesota Sales Tax		Period End Date	/	/	Due [Date	<u> </u>	/	/				
Your return must be postmarked by the 20th or received in our office by the 25th day of your City approved accounting period. LIQUOR TAX													
1	Total Taxable Liquor Sales				LIQUOR TAX								
2	Liquor Tax Due Line 1 X 3%.			—	4300-41402(06)						06)		
	LODGING TAX				LODGING TAX								
3	Gross Lodging Sales								4300-41	1403(FN	166)		
4	Less: Exclusions Written leases for 30 days or more and other tax exempt lodgings per City Code.								1001-41	403(FN	(66)		
5	Total Taxable Lodging Sales Line 3 - Line 4.							1	001-20298	3-BCVB	(FN66)		
6	Lodging Tax Due Line 5 X 7%.												
7	Informational Only: Lodging Sales by 3rd Party Intermediary (Expedia, Priceline, etc)												
	ADMISSION TAX					ADMISSION TAX							
8	Total Taxable Admission Sales												
9	Admission Tax Due Line 8 X 3%.			\rightarrow					1001-4	1401 (6	52)		
	TOTAL TAXES, PENALTIES AND INTEREST Notes:												
10	TOTAL LOCAL TAXES DUE Line 2 + Line 6 + Line 9.				-								
11	5% Penalty If payment is not made by date due, Line 10 X 5%.												
12	10% Penalty If payment is not made within 30 days after date due, (Line 10 + Line 11) X 10%.												
13	0 /0 111101001	If payment is not made by date due, (Line 10 + Line 11 + Line 12) X 5% X (Days past date due ÷ 360).			PENALTIES AND INTEREST								
14	otal Penalties and Interest Line 11 + Line 12 + Line 13.							1001-4	1404 (6	63)			
15	TOTAL AMOUNT DUE Line 10 + L	ine 14.		\rightarrow									
	I declare and certify under penalty of law that I have examined this statement and that to the best of my knowledge and belief, it is true and complete.												
	Signature Title (Print)		nt)										
	Name of Preparer (Print)		Date										
	Phone E-mail												